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Jasper Park Meeting, 1942

It is not too soon to remind our members that the annual meeting in 1942 will be held at Jasper Park, Alta., June 15th to 19th. We publish herewith an introductory illustration which will give some idea of the pleasant surroundings under which we are to meet.

This is a view of Bungalow Avenue and shows some of the modest looking bungalows which make up Jasper lodge, and which afford accommodation for 650 guests. These bungalows provide every comfort and convenience, and in addition are placed in surroundings of great beauty.

We look for a large and representative assembly.

Hospital Service Department Notes

War-time Emergencies Discussed at Ontario Hospital Association Convention

War-time emergencies in civilian hospitals and how to prepare for them was one of the main topics of discussion at the recent Ontario Hospital Association Convention held in Toronto on October 9th to 11th. Dr. B. T. McGhie, Deputy Minister of Health and Chairman of the Provincial A.R.P. Committee, outlined some of the preparations, such as, extra accommodation and supplies, training of personnel, protection of hospitals buildings and methods of evacuation in case of attack, which hospitals should make.

A Quiz Program conducted by Dr. Harvey Agnew, with two teams (three men and three women) of well known hospital administrators was a most popular session. An open session was held on hospital administration problems

when Miss E. McKee, of Brantford, spoke on the preparation of the hospital administrator, Dr. M. G. Brown, of Hamilton, and Mr. F. H. Holmes, of St. Catharines, on hospital problems during the war period, and Dr. Edwin Robertson, of Kingston, on what the hospital architect should consider in the design of a modern obstetrical department. Sectional meetings were held by the Women's Hospital Aids Association of Ontario, the Nursing Section of the Ontario Hospital Association, the Ontario Association of Record Librarians, the Ontario Association of Medical Social Workers and Hospital Dietitians.

Experiences in France during its fall in June, 1940, were related very vividly by Brigadier G. P. Vanier, D.S.O., M.C., guest speaker at the banquet. Dr. George F. Stephens, President of the Canadian Hospital Council, addressed the delegates on events of the past year which have affected hospitals. He stressed the fact that civilian hospitals were not prepared, in case of a large scale emergency caused by direct enemy attack, sabotage or explosion in munition plants, to furnish blood for injured civilians, and sug-

All communications intended for the Department of Hospital Service of the Canadian Medical Association should be addressed to Dr. Harvey Agnew, 184 College Street, Toronto.

gested that some arrangement be made whereby hospitals could keep an adequate supply of blood on hand.

Dr. F. W. Routley, in his secretary's report, told of the excellent progress being made by the Ontario Plan for Hospital Care. At the present time 50 per cent of Ontario hospitals have joined the plan, and enrolment of participants is now over 20,000. After only six months' operation the Plan is "out of the red". Mr. N. Saunders, Director of the Plan, stated that the question of enlistment of subscribers has caused grave concern and that the Board has decided to extend benefits as before enlistment, considering the wife as the head of the family. The Ontario Plan has also expressed willingness to accept as subscribers families of enlisted men, who were not subscribers previous to enlistment, provided deductions were made from the dependents' allowances by the federal government.

Mr. Clarke Keith, of Windsor, was elected President. Other officers are: Honorary President—Dr. L. C. Fallis, of London; Honorary Vice-president—Mr. C. J. Decker, of Toronto; President-elect—Mr. E. A. Horton, of St. Thomas; First Vice-president—Mrs. O. W. Rhynas, of Burlington; Second Vice-president—Miss E. M. McKee, of Brantford; Third Vice-president—Mr. J. W. H. Bower, of Toronto; Secretary-Treasurer—Dr. F. W. Routley, of Toronto.

Canadian Hospital Council Meeting

The Canadian Hospital Council held its sixth biennial meeting at the Windsor Hotel, Montreal, October 10th and 11th, with Dr. George F. Stephens, superintendent of the Royal Victoria Hospital, Montreal, in the chair.

Much of the discussion centred around the difficulties facing hospitals in wartime: the enlistment of personnel, the increasing cost of supplies, and the rôle of the hospitals in national defence. Concern was expressed as to the extent to which the defence preparations, particularly, A.R.P., had extended from the federal director to the local areas. In this connection, Dr. Ross Millar of the Department of Pensions and National Health stated that the government had obtained from the Canadian Hospital Council a list of hospitals prepared to take extra patients in a national emergency, and that stores of beds and mattresses are located at strategic points all over the Dominion which can be shipped to these hospitals on a few hours' notice.

In view of the shortage of graduate nurses and of applicants for entrance to schools of nursing (particularly serious in Montreal and the Maritimes), the Council passed a resolution urging approved schools of nursing to enroll as large classes of probationers as possible, and also urged the Government to work out a plan whereby approved schools of nursing could be subsidized (as is being done in the United

States) to help meet the extra expense involved. It was suggested that a "campaign" for enrolment in the schools of nursing might be launched on a patriotic basis. Pre-nursing university courses and centralized teaching were also suggested as solutions to the shortage of teaching personnel.

An important announcement in connection with the rehabilitation of returned men was that made by a Department official to the effect that where many soldiers are stationed and where there is no federal hospital, the D.P.N.H. will purchase equipment for physical rehabilitation and loan it to the civilian hospitals.

In consideration of the fact that the Department of Pensions and National Health is now taking steps to formulate plans for a possible plan of health insurance which may be introduced in the future, a resolution was passed assuring the government of the Council's desire to co-operate in any sound plan for improving the quality and lessening the burden of the cost of medical care, and requesting that the Council be accorded the privilege of naming a representative on any advisory board set up to consider the formation of any plan of health insurance.

The Council also urged that the government set up a plan of hospital care insurance to cover all soldiers' dependents resident in Canada, such to be financed by a small monthly deduction at the source from assigned pay and allowances. It was also suggested that if a cost-of-living bonus should be added to the present allowances, a portion of this could be in the form of hospitalization benefits.

The report of the special committee on Nomenclature recommended to the Executive the adoption of the "Standard Classified Nomenclature of Disease", that it should urge the use of this system in all hospitals throughout Canada, and that its advantages be brought to the notice of all active practitioners as well as medical students. These findings were in agreement with those of the Committee on Nomenclature of the Canadian Medical Association, already endorsed by the Executive of that body.

Officers elected are: President—Dr. George F. Stephens, Montreal; First Vice-president—Mr. H. G. Wright, Saint John; Second Vice-president—Dr. A. K. Haywood, Vancouver; Executive Members—Mr. J. H. Roy, Montreal, and Dr. A. F. Anderson, Edmonton.

Standard Classified Nomenclature of Disease Recommended by Canadian Hospital Council

The special committee on Nomenclature of the Canadian Hospital Council in its report to the Council at the Montreal meeting in September recommended the general adoption of the Standard Classified Nomenclature of Disease. This report is a close parallel in its recommendations to that of the Special Committee on Nomencla-

ture of the Canadian Medical Association, the report of which was adopted at Winnipeg in June.

RECOMMENDATIONS

The recommendations of this Committee on Nomenclature of the Canadian Hospital Council are as follows:

1. That an endeavour be made to have one system of nomenclature used by hospitals throughout Canada.
2. That the "Standard Classified Nomenclature of Disease" be officially recognized by the Canadian Hospital Council.
3. That hospitals now using one of the older systems be encouraged to replace such by the "Standard Classified Nomenclature of Disease".
4. That as occasion arises, hospitals, irrespective of size, in which diseases are not indexed at the present time, provide themselves with a copy of the "Standard", and by every means in their power endeavour to have each doctor employ the terms of the "Standard" when writing a diagnosis on a patient's record, or arrange to have the hospital record librarian permitted to substitute the proper terms.
5. That a plan of education be devised whereby the "Standard Classified Nomenclature of Disease" be brought to the notice of all active practitioners both in general and in special practices as well as to the students now training in the medical schools.

The Committee was made up of Mr. Fred J. Fish, Record Librarian, Vancouver General Hospital (Chairman); Dr. A. Hardisty Sellers, Medical Statistician for Ottawa; Miss Isobel Marshall, R.R.L., Brantford General Hospital; Miss Lillian Johnstone, R.R.L., Hamilton General Hospital; Dr. George Hooper, Supervisor of Records, Ottawa Civic Hospital; Dr. H. E. MacDermot, Director of Records, Montreal General Hospital; and Rev. Sister Mary Paul, Record Librarian, St. Michael's Hospital, Toronto.

After reviewing a number of the more widely used systems, the Report states, "With the withdrawal of the Ponton Classified Index of Diseases and Operations, it would seem obvious that the logical recommendation for adoption would be the 'Standard Classified Nomenclature of Disease'."

PLAN OF EDUCATION NEEDED

The Committee considers it important that active steps be taken to hasten its general adoption and that "its acceptance be not allowed to advance at its own leisurely pace". A definite plan of education is needed. The avenues in which support or education would be most

valuable include the medical schools, and such hospital personnel as the pathologists, the radiologists, the anaesthetists, the residents, the medical librarians and the physiotherapists. The official journals of medical, nursing and kindred societies could be of considerable assistance. In order to gain the co-operation and goodwill of the practising physicians, the Canadian Medical Association and its provincial divisions could play a most helpful rôle.

As the medical colleges have an excellent opportunity to educate the medical students to use a uniform system, the committee suggests that every effort should be directed to secure their co-operation. Although textbooks use varied and frequently hybrid systems, the consistent use of one system by the teaching faculty and the teaching hospitals would be of tremendous educational advantage.

"Even if it be not expedient to officially adopt this nomenclature, senior students could be made familiar with it so that there would be less difficulty in gaining their co-operation in its use during their internship or later in practice. It would appear at the present time that very few medical graduates have been made acquainted at any time during their undergraduate course with any of the several well prepared and heretofore accepted systems."

In hospitals, although a great many now use the "Standard Classified" system, there is some hesitation on the part of the management in adopting a new system unless the doctors desire it. "Unless assured that the medical staffs will really take hold and follow the system, it is doubtful if hospitals are justified in going to the expense of setting up a system which in turn implies the purchase of copies for the different wards, etc., and the possible training of the record librarian in the use of the system."

"It would appear, therefore, that the medical staffs of hospitals should be encouraged to study this whole question and that they themselves should be the ones to ask the administration to set up the system. For this reason we welcome the definite recommendations made by the Committee on Nomenclature of the Canadian Medical Association."

The *medical records librarians* could help the medical staff, the interns and the nurses in becoming familiar with the system. "Much could be accomplished, too, if writers in medical and nursing journals would use the proper terminology in preparing articles. Editors of such journals might endeavour also to co-operate by adhering to the 'Standard Classified Nomenclature of Disease' in editing scientific articles on clinical medicine." This system of nomenclature is now officially endorsed by nearly all of the national medical, hospital and allied organizations on this continent and has been recommended for adoption in some of the leading teaching hospitals in Great Britain.